

CALIFORNIA RURAL HEALTH POLICY COUNCIL

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California Rural Health Policy Council - Public Meeting Summary
December 3, 2008 -- Hilton Arden West Hotel – Sacramento

Council Directors

Stephen W. Mayberg, Ph.D., Chair
Director, Department of Mental Health

David M. Carlisle, M.D., Ph.D.
Director, Office of Statewide Health Planning and Development

Lesley Cummings
Executive Director, Managed Risk Medical Insurance Board

Sandra Shewry, M.P.H., M.S.W.
Director, Department of Health Care Services

Laura Hardcastle, representing Director Mark B. Horton, Department of Public Health

Morgan Staines, representing Director Renée Zito, Department of Alcohol and Drug Programs

Council Staff

Kathleen Maestas, Rural Health Program Administrator
Elvira Chairez, Office Technician, RHPC
Terrence Nolan, SSA, CHPDAC

The meeting was called to order by Chairperson Stephen W. Mayberg at 9:41 a.m.

DEPARTMENTAL UPDATES**Laura Hardcastle, representing Director Horton, Department of Public Health:**

- **Legislative Update:**
 - SB 1058 passed; requires hospitals to report incidents of infections and for the Department to post this information on its website.
 - SB 541 passed; increases penalties for deficiencies that might jeopardize the release of public health medical information; requires facilities to report on the information; penalties for disclosures of medical information.
 - AB 211 passed; requires healthcare providers to protect the privacy of patient's medical information; established the Office of Health Information Integrity, which imposes administrative fines for violations.

Morgan Staines, representing Director Zito, Department of Alcohol and Drug Programs:

- Certification of counselors:
 - Regulations have been in place for approximately three years.
- Enhance treatment standards for licensed or certified facilities:
 - Regarding the existing standards, improvements are needed and the department is working towards this.
- Internal debate about the State budget:
 - Given the state of the State, can the Department ask stakeholders in the field to take on more responsibilities?

David M. Carlisle, Director, Office of Statewide Health Planning and Development:

- OSHPD's new location: 400 R Street (4th & R), part of the CalPERS campus.
- Leadership changes at the Office:
 - Ron Spingarn -- new Deputy Director of Health Care Information Division.
 - Lupe Alonzo-Diaz -- new Executive Director of Health Professions Education Foundation.
 - Carl McLaney -- new Deputy Director of Cal-Mortgage Program.
- New products discussed:
 - Most critical for rural providers --HAZUS Program (Hazards United States), a new seismic safety assessment program that is being applied to California hospitals. This new assessment could push seismic compliance deadlines from 2013 to 2030 for facilities that pass the HAZUS threshold. The facilities that have applied for HAZUS are passing that threshold at about a 60% rate.
 - Health Care Atlas – provides a GIS assisted look at California health care facilities.
 - Health Research Brief on Mortality in California Hospitals was released. California's first Inpatient Mortality Indicator Reports will be released soon and will triple the number of conditions reported by OSHPD.

Sandra Shewry, Director, Department of Health Care Services:

- Provider rate reductions
 - Most were restored pursuant to court action, but some are continuing at the 1%, 5%, and 10% level.
- Changes to the Medi-Cal program:
 - Reduction of optional benefits; elimination of the 1931B, which is an eligibility category for low-income families and parents.
 - Implementation complete of the DRA (Deficit Reduction Act) standards for eligibility. This federal law requires citizenship checks for all U.S. citizens.
 - Given the current economic status, more people will be eligible for Medi-Cal:
 - CalWORKS expenses often increase as well

- Leadership changes:
 - David Maxwell-Jolly, currently with the Department of Child Support and a long-time legislative staffer on health and human services issues, will be the new Department of Health Care Services Director.
 - Toby Douglas, who served as Stan Rosenstein's number two Program Manager, will be the new Chief Deputy.

Lesley Cummings, Executive Director, Managed Risk Medical Insurance Board:

- Budget reductions to be implemented February 1, 2009:
 - Increase in premiums for families with incomes at 150% of FPL or above; \$1,500 dental benefit cap.
 - Payments to health, dental, and vision plans were reduced by 5%.
 - Negative consequence: Having to move 60,000 children from one plan to another as part of the open enrollment.
 - Positive consequence: Governor proposed a funding level for rural health demonstration projects of 2 million dollars; legislature provided 6. This is out of the Proposition 99 tobacco tax revenue.
 - Board able to fund 25 new projects, which make for a total of 49; Board able to fund new and innovative programs in rural health/special populations.
- The budget contained a General Fund shortfall of 17.2 million dollars for Healthy Families. The Board is aware of this deficiency and is contemplating a waiting list for the Healthy Families Program.

Stephen W. Mayberg, Chairperson, Director, Department of Mental Health:

- Budget reductions in core programs:
 - Vehicle license fees are down
 - Sales tax is down
 - No cost of living increases
- General consensus is that much of early intervention will not or *should* not occur in public mental health outpatient clinics; should occur in communities.
- In regards to health disparities, being a person of color or from a rural or frontier area can mean that he/she is probably going to have less access and not receive the same level or quality of care than they would get if they were in other parts of the state. This is an issue to be addressed.
- Workforce:
 - Human resources not as available to provide services. Modern/high tech accessibility is not a major component in regards to telemedicine/tele-health.
 - Department of Mental Health working towards encouraging more people into health-providing professions, specifically the mental health profession.
 - Training and stipend programs being implemented in order to attract more people to work in unserved or underserved areas.
 - Education and training to be implemented to screen or process preliminary intervention by working closely with Alcohol and Drug; how to prevent co-occurring disorders.

PUBLIC TESTIMONY

Steve Barrow, 211 CA, West Sacramento, California

- A 211 system statewide will alleviate the need to have redundant and duplicative 800 numbers for all agencies. A 211 system will efficiently direct people to the appropriate services and cut down on inquiries for the appropriate program(s).

Beth Robey, Director, Colusa County DHHS

- When is the State going to provide guidance on which services to cut as a result of allocation reductions and caps? In CCS program and with a 25% reduction in administrative services, do we restrict eligible medical conditions or stop services in March or place new referrals on a waiting list until July?

Anna Maldonado, Mental Health Case Management, Chico, California

- Is the Mental Health Department supporting transportation needs and/or access in rural areas to obtain medical services for clients suffering from mental illness? Is Medi-Cal being billed for these services?
- What is medication compliance for incarcerated clients or inpatients in a lock-up facility? What programs are available to assist mental health clients with In Home Support Programs when patients are released from inpatient facilities?

Carol Mordhorst, Ukiah, California

- With Blue Cross & Health Net eliminating services from some counties, which rural counties are affected and what will the impact be on Healthy Families kids?
- Provide this information to CSRHA and share with CSRHA distribution.

Judith Shaplin, Mountain Health & Community Services, Inc., Campo, California

- Is there a need for Drug and Alcohol Medi-Cal applications to be modified to recognize existing Medi-Cal providers?
- What is the timeline for audit or payment of PPS wrap around or rate setting reconciliations? Current timeline is 3 years or more and it is putting a lot of financial stress on organizations.

Mickey Richie, Regional Council of Rural Counties (RCRC), Sacramento

- Regarding data source, suggest having someone give a presentation to walk us through the data. Possibility of generating email list?
- Regarding the homeless population in Placer County: The State had an effort for a 10-year plan; there was a big meeting 18 months ago about how the State can develop a systematic look at homelessness in the State. With budget concerns, it is a good time to address this issue, specifically housing needs and other issues dealing with the homeless population.